

STUDENTS ONLY	Current School	Previous School (if applicable)
Name of school		
City/State		
Academic Advisor Name & Contact #		

FINANCIAL INFO	Bank/Institution Name	Balance On Deposit or Balance Owed
Savings Account		
Checking Account		
Auto Loan(s)		
Total Credit Card Balance		

VEHICLES (Include vehicles belonging to other proposed occupants as well.)				
Make	Model	Color	Year	License Plate

REFERENCES & EMERGENCIES	Doctor	Lawyer	Nearest Relative Living ELSEWHERE
Name			
Street Address			
Unit/Suite # (if applicable)			
City			
State & Zip			
Phone #			

By signing the application you grant us permission to communicate with all the contacts listed in this section in the event we can't locate you. Furthermore, if you abandon the apartment for any reason then you grant us permission to allow your relative listed above to remove all contents of the dwelling on your behalf. Initial here: _____

GENERAL INFORMATION

When would you be able to move in?		How long do you expect renting from us?		Would any of the occupants be smokers?	
Pets? How many? (list type & # of each) Pet application required.			Why are you moving from your current address?		
Have you had any reoccurring problems with your current apartment or landlord? If yes, please explain					Have you ever been served a late rent notice?
Have you ever been served an eviction notice? If so, when?	Have you been a party to a lawsuit in the past? If yes, when?	Have you ever filed bankruptcy? If so when?	List any verifiable sources & amounts of additional income (optional)		
If you were to run into financial difficulty in the future and couldn't come up with the money to pay the rent, do you know someone who would loan you the money? If so, provide the person's name, address & phone # so that we can use them as a reference for you.					
Have you ever been convicted of a felony?		We may run a NATIONAL credit & background check. Is there anything negative we will find that you want to comment on?			
How did you hear about this apartment?		Do you know anybody else looking for an apartment? Please provide their name and number. If you refer a friend and you each rent separate apartments from us then we will pay you a			

Agreement & Authorization Signature *(page 3 of 3)*

- I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided, and communication with any and all names listed on this applications.
- I also understand that these contents will be shared with the future Landlord.
- I understand that any discrepancy or lack of information's may result in the rejection of this application.
- I understand that this is an application for a rental property and does not constitute a rental or lease agreement in whole or part. Until the Landlord has approved this application, no tenancy has been created and you have no rights to this landlord.
- I further understand that there is a **NON-REFUNDABLE** \$40 fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the apartment.
- Any deposit hereunder, other than the non-refundable application fee, shall be deemed made by such applicant regardless of whether the applicant personally signs or through a representative and such by signing in such capacity waives all rights to such a deposit.
- Upon approval, Applicant agrees to execute a Standard Rental Lease agreement, as time to time revised, and on the terms and conditions contained herein. Any deposit made by applicant, up to one months rent, may be retained by landlord as liquidated damages for failure of applicant to execute a such lease, make any payment hereunder, or if such lease is terminated prior to occupancy for the untruth of any statement contained herein.
- Any deposit made by applicant may be retained by the application processing company (Lenox Realty Group) for services rendered if such lease is not approved due to the untruth or fraudulency of any statement contained herein.
- Any questions regarding rejected applications must be submitted in writing and accompanied by a self addressed stamped envelope.

Signature: _____

Date: _____